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11/04/2003

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FIRST NAMED INVENTOR APPLICATION NO. FILING DATE ATTORNEY DOCKET NO. CONFIRMATION NO. 09/691,231 10/19/2000 Christen M. Frankle S-94,660

TITLE OF INVENTION: SPEECH RECOVERY DEVICE

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APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE 02/04/2004
nonprovisional	NO ·	\$1330	\$0	\$1330	
EXA	MINER	ART UNIT	CLASS-SUBCLASS	7	
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1. Change of correspondent CFR 1.363).	ce address or indication of "Fe		2. For printing on the patent front pag names of up to 3 registered patent	attorneys or i Jam	es C. Durkis
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			agents OR, alternatively, (2) the name firm (having as a member a registere- agent) and the names of up to 2 regi	d attorney or 2 Gemma	Morrison Bennet
□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			attorneys or agents. If no name is list will be printed.		l A. Gottlieb

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Please check the appropriate assignee category or categ	ories (will not be printed on the patent);	🖸 individual	Corporation or other private group entity	<b>XX</b> governmen
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):			
XX Issue Fee	A check in the amo	unt of the fee(s)	is enclosed.	
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OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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0 2 2004 E TRA	ANSMITTAL OF FORM (In Response to Notice of In	MAL DRAWINGS formal Drawings)	Docket No. S-94,660		
Receive Cation O	f. Christen M. Frankle				
Serial No.	Filing Date	Batch No.	Examiner	Art Unit	
09/691,231	October 19, 2000	NA	HARVEY, Minsun Oh	2644	
ention: SPEEC	H RECOVERY DEVICE	·			
		Address to: Commissioner for Pate P.O. Box 1450 Alexandria, VA 22313-			
response to the N	NOTICE OF INFORMAL D	RAWINGS mailed on	11/4/2003 attac	ched please find:	
(a) Two	(2) sheets of formal draw	ing(s) for this applica			
		g indicates the identif	ving indicia suggested in 37 Cf	FR Section 1.84(c).	
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